

FROM SUGHRUE MION PLLC DC

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FAX

Date June 7, 2004
To Examiner Thanh X. LUU
Of Group Art Unit: 2878
Fax 703-872-9306
From John H. Mion
Subject U.S. Appln. No. 10/001,963
Our Ref Q-67600

Pages *20*
(including cover sheet)

Please call attention to problems with this transmission by return fax or telephone. Thank you.

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**AMENDMENT UNDER 37 C.F.R. § 1.116
EXPEDITED PROCEDURE
GROUP 2878**

**PATENT APPLICATION
Q-67600**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Robert R. ROTZOLL, et al.

Appln. No.: 10/001,963

Group Art Unit: 2878

Confirmation No.: 1399

Examiner: Thanh X. LUU

Filed: December 05, 2001

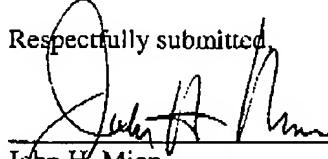
For: **METHOD, SENSING DEVICE AND OPTICAL SENSING DEVICE INCLUDING A SENSING DEVICE FOR COMPARING LIGHT INTENSITY BETWEEN PIXELS**

CERTIFICATION OF FACSIMILE TRANSMISSION

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

I hereby certify that the attached **AMENDMENT UNDER 37 C.F.R. § 1.116...** and **EXCESS CLAIM FEE PAYMENT LETTER** are being facsimile transmitted to the Patent and Trademark Office on June 7, 2004.

Respectfully submitted

John H. Mion
Registration No. 18,879

SUGHRUE MION, PLLC
2100 Pennsylvania Avenue, N.W.
Washington, D.C. 20037-3213
(202) 663-7901

WASHINGTON OFFICE

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CUSTOMER NUMBER

Date: June 7, 2004

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P.O. Box 1450
Alexandria, VA 22313-1450

VIA FACSIMILE

Sir:

An Amendment Under 37 C.F.R. § 1.111 is attached hereto for concurrent filing in the
above-identified application. The resulting excess claim fee has been calculated as shown

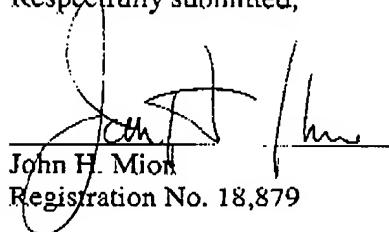
below:

	After Amendment	Highst No. Previously Paid For					
All Claims	27	-	27	=	0 X	\$18.00	= \$
Independen:	4	-	3	=	1 X	\$86.00	= \$86.00
					TOTAL		= \$86.00

EXCESS CLAIM FEE PAYMENT LETTER
U.S. APPLN. NO. 10/001,963

Please charge the excess claim fee in the amount of \$86.00 to Deposit Account No. 19-4880. Please charge any additional amount to said Deposit Account No. 19-4880. A duplicate copy of this letter is enclosed.

Respectfully submitted,


John H. Mion
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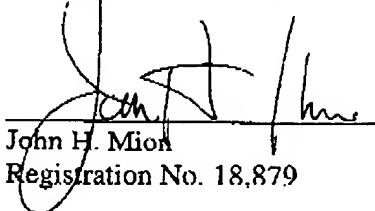
below:

		Highest No. Previously Paid For				
All Claims	After Amendment	27	-	27	-	0 X \$18.00 = \$
Independent		4	-	3	=	1 X \$86.00 = \$86.00
						TOTAL = <u>\$86.00</u>

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AMENDMENT UNDER 37 C.F.R. § 1.116
and
REQUEST FOR RECONSIDERATION
and
REQUEST FOR INTERVIEW

MAIL STOP AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

VIA FACSIMILE

Sir:

In response to the final Office Action mailed March 5, 2004, please amend the above-identified application as follows.

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